PTO/SB/05 (08-00)

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UTILITY PATENT APPLICATION

555255012191 Attorney Docket No.

Mousseau First Inventor System & Method For

TRA	NSMITTAL	System & Method For Pushing no Title Information From A Host.		
(Only for new nonprovision	onal applications under 37 CFR 1.53(b))	Express Mail Label No. EL711875622US		
	ATION ELEMENTS	ADDRESS TO: Assistant Commissioner for Patents Box Patent Application		
1. X Fee Transmittal If Submit an original and a Applicant claims See 37 CFR 1.27 3. X Specification (preferred arrangement Posscriptive title - Cross Reference - Statement Regions - Reference to so or a computer - Background of - Brief Description - Detailed Description - Detailed Description - Claim(s) - Abstract of the Statement Region - Claim(s) - Abstract of the Statement Region - Claim(s) - Abstract of the Statement Region - Claim(s) - Claim(s) - Abstract of the Statement Region - Claim(s) - Claim(s) - Claim(s) - Claim(s) - Abstract of the Statement Region - Claim(s) - C	[Total Pages 35] Int set forth below) Int of the invention Interest to Related Applications Interest to	Top-ROM or CD-R in duplicate, large table or Computer Program (Appendix) 8. Nucleotide and/or Amino Acid Sequence Submission (if applicable, all necessary) a. Computer Readable Form (CRF) b. Specification Sequence Listing on: i. □ CD-ROM or CD-R (2 copies); or ii. □ paper c. □ Statements verifying identity of above copies ACCOMPANYING APPLICATION PARTS 9. ☒ Assignment Papers (cover sheet & document(s)) 10. ☒ 37 CFR 3.73(b) Statement □ Power of (when there is an assignee) □ Attorney 11. □ English Translation Document (if applicable) 12. ☒ Information Disclosure Statement (IDS)/PTO-1449 ☒ Copies of IDS Statement (IDS)/PTO-1449 ☐ Citations 13. □ Preliminary Amendment 14. ☒ Return Receipt Postcard (MPEP 503) (Should be specifically itemized) 15. □ Certified Copy of Priority Document(s) (if foreign priority is claimed)		
named in 1.63(d)(2)	the prior application, see 37 CFR and 1.33(b).	16. Other:		
Application Data Sheet. See 37 CFR 1.76 17. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in a preliminary amendment, or in an Application Data Sheet under 37 CFR 1.76: Continuation Divisional Continuation-in-part (CIP) of prior application No.: 09 / 087,623 Prior application information: Examiner Edelman, B. Group / Art Unit 2757 For CONTINUATION OR DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts. 18. CORRESPONDENCE ADDRESS				
Customer Number or Bar Cod				
	Orser Costans: No. or Adech (se			
Name	David B. Cochran, Es	sq.		
Address City Country	Jones, Day, Reavis & North Point, 901 Lal Cleveland US	State OH Zip Code 44114		
Country	Tele	phone 216/586-3939 Fax 216/579-0212		
Name (Print/Type)	David B. Cochran	Registration No. (Attorney/Agent) 39,142		
Signature	David B. Cox	na Date 2/12/01		

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FEE TRANSMITTAL for FY 2001

Patent fees are subject to annual revision.

TOTAL	AMOUNT	OF PA	YMENT
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Complete if Known		
Application Number		
Filing Date		
First Named Inventor	Mousseau	
Examiner Name		
Group Art Unit		
Attorney Docket No.	555255012191	

METHOD OF PAYMENT	FEE CALCULATION (continued)			
The Commissioner is hereby authorized to charge indicated fees and credit any overrayments to:	3. ADDITIONAL FEES			
indicated fees and credit any overpayments to: Deposit	Large Entity Small Entity Fee Fee Fee Fee Fee Fee Pescription Fee Pe			
Account Number 501432	Code (\$) Code (\$)	iia .		
Deposit	105 130 205 65 Surcharge - late filing fee or oath	_		
Account Name Jones, Day	127 50 227 25 Surcharge - late provisional filing fee or cover sheet	_		
Charge Any Additional Fee Required Under 37 CFR 1.16 and 1.17	139 130 139 130 Non-English specification	_		
Applicant claims small entity status.	147 2,520 147 2,520 For filing a request for ex parte reexamination	\dashv		
See 37 CFR 1.27 2. Payment Enclosed:	112 920* 112 920* Requesting publication of SIR prior to Examiner action	_		
Check Credit card Money Other	113 1,840* 113 1,840* Requesting publication of SIR after Examiner action	_		
FEE CALCULATION	115 110 215 55 Extension for reply within first month	4		
1. BASIC FILING FEE	116 390 216 195 Extension for reply within second month	_		
Large Entity Small Entity	117 890 217 445 Extension for reply within third month	\dashv		
Fee Fee Fee Fee Description Code (\$) Code (\$) Fee Paid	118 1,390 218 695 Extension for reply within fourth month			
404 740 004 055 11884-68	128 1,890 228 945 Extension for reply within fifth month			
101 710 201 355 Utility filing fee 710	119 310 219 155 Notice of Appeal			
107 490 207 245 Plant filing fee -	120 310 220 155 Filing a brief in support of an appeal			
108 710 208 355 Reissue filing fee -	121 270 221 135 Request for oral hearing	_		
114 150 214 75 Provisional filing fee	138 1,510 138 1,510 Petition to institute a public use proceeding	_		
	140 110 240 55 Petition to revive - unavoidable	_		
SUBTOTAL (1) (\$) 710.00	141 1,240 241 620 Petition to revive - unintentional	_		
2. EXTRA CLAIM FEES	142 1,240 242 620 Utility issue fee (or reissue)			
Fee from Extra Claims below Fee Paid	143 440 243 220 Design issue fee	_		
Total Claims 26 -20** = 6 x 18 = 108	144 600 244 300 Plant issue fee			
Independent 3 - 3** = 0 x - = -	122 130 122 130 Petitions to the Commissioner	_		
Multiple Dependent =	123 50 123 50 Petitions related to provisional applications			
1	126 240 126 240 Submission of Information Disclosure Stmt	\dashv		
Large Entity Small Entity Fee Fee Fee Fee Description Code (\$) Code (\$)	581 40 581 40 Recording each patent assignment per property (times number of properties)			
103 18 203 9 Claims in excess of 20	146 710 246 355 Filing a submission after final rejection			
102 80 202 40 Independent claims in excess of 3	(37 CFR § 1.129(a)) 149 710 249 355 For each additional invention to be	\neg		
104 270 204 135 Multiple dependent claim, if not paid	149 710 249 355 For each additional invention to be examined (37 CFR § 1.129(b))	_		
109 80 209 40 ** Reissue independent claims over original patent	179 710 279 355 Request for Continued Examination (RCE)	_		
110 18 210 9 ** Reissue claims in excess of 20 and over original patent	169 900 169 900 Request for expedited examination of a design application			
SUBTOTAL (2) (\$) 108	Other fee (specify)	_		
**or number previously paid, if greater; For Reissues, see above	*Reduced by Basic Filing Fee Paid SUBTOTAL (3) (\$) 40.00			
SUBMITTED BY Complete (if applicable)				
Name (Print(Type) David B. Cochran	Registration No. 39,142 Telephone 216/586-393	9		

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(Attorney/Agent)

39,142

Date

David B. Cochran

Signature